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## APPLICANTS

Stephen James Sufka, Carson City, NV;

Thane Fleming Tahti, Gardnerville, NV;

David Ray Price, Gardnerville, NV; Steven Francis Roy, Gardnerville, NV;

Kristoffer Wayne Wickstead, Carson City, NV;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NV	SHEETS DRAWING 11	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged  Examiner's Signature <i>[Signature]</i> Initials				

## ADDRESS

23413

CANTOR COLBURN, LLP

55 GRIFFIN ROAD SOUTH

BLOOMFIELD, CT

06002

## TITLE

METHOD AND APPARATUS FOR AUTOMATED MANUFACTURE OF A PROBE TIP

FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )  <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )